

# Important Update on Your Disability Insurance Medical Evaluations

Dear [Recipient's Name],

We hope this message finds you well. We are writing to inform you about upcoming updates regarding your disability insurance medical evaluations.

As part of our ongoing commitment to provide you with the best service, we will conduct a re-evaluation of your medical status. This will help us assess your eligibility and ensure that you receive the appropriate support. The scheduled date for your evaluation is [insert date]. Please confirm your availability for this date.

Should you have any documents or medical records relevant to your condition, we kindly ask you to bring them along on the day of your evaluation.

If you have any questions or need to reschedule, please feel free to reach out to our office at [insert phone number] or via email at [insert email address].

Thank you for your cooperation.

Sincerely,

[Your Name]  
[Your Position]  
[Company Name]  
[Company Address]  
[Contact Information]